DOCKET NO.: 261089US0X PCT/km

#### ND TRADEMARK OFFICE IN THE UNITED STATES

IN RE APPLICATION OF:

Philippe MARLIERE, et al.

SERIAL NO: 10/510,953

FILED:

October 29, 2004

FOR:

GENOMIC LOBRARY OF CYANOPHAGE S-2L AND FUNCTIONAL

**ANALYSIS** 

# SUBMISSION OF SUPPLEMENTAL APPLICATION DATA SHEET

Office of Initial Patent Examination Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicant(s) submit herewith a Supplemental Application Data Sheet for the aboveidentified application for the purpose of correcting Frederique Gallison's address.

Respectfully Submitted,

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### APPLICATION INFORMATION

Application Number:: 10/510,953
Application Date:: 10/29/04
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE

Title:: GENOMIC LIBRARY OF CYANOPHAGE

S-2L AND FUNCTIONAL ANALYSIS

Attorney Docket Number:: 261089US0XPCT

Total Drawing Sheets:: 5

### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: France

Status:: FULL CAPACITY

Given Name:: Philippe Family Name:: MARLIERE

City of Residence:: Paris
Country of Residence:: France

Street of Mailing Address:: 5, rue Gossec

City of Mailing Address:: Paris
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 75012

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: France

Status:: FULL CAPACITY
Given Name:: Pierre-Alexandre

Family Name:: KAMINSKI

City of Residence:: Paris
Country of Residence:: France

Street of Mailing Address:: 4, rue Bailly

City of Mailing Address:: Paris
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 75003

**Applicant Authority Type:: INVENTOR** Primary Citizenship Country:: France

Status:: **FULL CAPACITY** 

Given Name:: Frederique Family Name:: GALISSON Country of Residence:: Switzerland

Street of Mailing Address:: Gietroz - 1925 Finhaut

Country of Mailing Address:: Switzerland

City of Residence:: Lausanne

City of Mailing Address:: Lausanne

Postal or Zip Code of Mailing Address:: 1006

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: France

Status:: **FULL CAPACITY** 

Given Name:: Madeleine Family Name:: **BOUZON** City of Residence:: Meudon Country of Residence:: France

Street of Mailing Address:: 4, rue des Capucins

City of Mailing Address:: Meudon Country of Mailing Address:: France Postal or Zip Code of Mailing Address:: 92190

Applicant Authority Type:: **INVENTOR** 

Primary Citizenship Country:: France

Status:: **FULL CAPACITY** Given Name:: **Sylvie** 

Family Name:: **POCHET** City of Residence:: **Paris** Country of Residence:: France

Street of Mailing Address:: 201, rue Lecourbe

City of Mailing Address:: **Paris** Country of Mailing Address:: France Postal or Zip Code of Mailing Address:: 75015

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: France

Status:: FULL CAPACITY

Given Name:: Jean

Family Name:: WEISSENBACH

City of Residence:: Paris
Country of Residence:: France

Street of Mailing Address:: 163, rue de Vaugirard

City of Mailing Address:: Paris
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 75015

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: France

Status:: FULL CAPACITY

Given Name:: William
Family Name:: SAURIN
City of Residence:: Paris
Country of Residence:: France

Street of Mailing Address:: 31, rue de la Procession

City of Mailing Address:: Paris
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 75015

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: France

Status:: FULL CAPACITY

Given Name:: Catherine
Family Name:: ROBERT
City of Residence:: Evry
Country of Residence:: France

Street of Mailing Address:: 2, rue Gaston Cremieux

City of Mailing Address:: Evry
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 91057

Applicant Authority Type::

**INVENTOR** 

Primary Citizenship Country::

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Status::

**FULL CAPACITY** 

Given Name::

Virginie

Family Name::

**VICO** 

City of Residence::

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Country of Residence::

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Street of Mailing Address::

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City of Mailing Address::

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Country of Mailing Address::

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Postal or Zip Code of Mailing Address::

91057

# CORRESPONDENCE INFORMATION

Correspondence Customer Number::

22850

## REPRESENTATIVE INFORMATION

Representative Customer Number::

22850

## DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/FR03/01328	04/28/03

### FOREIGN PRIORITY INFORMATION

<b>Application Number:</b>	Country::	Filing Date::	Priority Claimed::
02/05424	France	04/30/02	YES

### ASSIGNMENT INFORMATION

Assignee Name::

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City of Mailing Address::

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Country of Mailing Address::

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Postal or Zip Code of Mailing Address::

75015